FORM D

## UNITED STATES SECURITIES AND EXCHANGE COMMUNICATION

Washington, D.C. 20549

FORM D NOTICE OF SALE OF SECURIX PURSUANT TO REGULATION & SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response.... 16.00

SEC	USE OI	NLY			
Prefix					
DATE RECEIVED					

					1296391			
Name of Offering ( check if this is an amendment and name has Common Stock and Convertible Promissory Notes of Tengion			indicate	change	.)			
Filing Under (Check box(es) that apply): □Rule 504 □Rule 505 Type of Filing: ☑ New Filing □ Amendment	ØRu	ıle 506 □	Section	4(6) 🗆	ULOE			
A. BASI	CIDE	NTIFIC	ATION	DATA				
Enter the information requested about the issuer					04034263			
Name of Issuer ( check if this is an amendment and name has check Tengion, Inc.	nanged	d, and ind	icate ch	ange.)				
Address of Executive Offices (Number and Street, City, State, Zi c/o Scheer & Company Inc., 250 West Main Street, Branford,					Telephone Number (Including Area Code) 203-481-0767			
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)  Telephone Number (Including Area Code)								
Brief Description of Business: research development and sale of	f phar	rmaceuti	ical pro	ducts	PROCESSED			
Type of Business Organization  ☐ corporation ☐ limited partnership already formed ☐ business trust ☐ limited partnership, to be formed	JUL 0 6 2004							
Actual or Estimated Date of Incorporation or Organization:	М	Ionth	,	ear ear	FINANCIAL  ☑ Actual □ Estimated			
Actual of Dathiated Date of incorporation of Organization.	0	7	0	3	El Actual   Estimated			
Jurisdiction of Incorporation or Organization: (Enter two-letter CN for Canada; I								
GENERAL INSTRUCTIONS Federal: Who Must File: All issuers making an offering of securities in reliance on	an exe	emption ur	nder Reg	ulation [	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).			
When To File: A notice must be filed no later than 15 days after the first s Commission (SEC) on the earlier of the date it is received by the SEC a date it was mailed by United States registered or certified mail to that add	t the ad							
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street	et, N.W	/., Washin	gton, D.	C. <b>205</b> 49	ı.			
Copies Required: Five (5) copies of this notice must be filed with the SEO of the manually signed copy or bear typed or printed signatures.	C, one	of which r	must be 1	nanually	signed. Any copies not manually signed must be photocopies			

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
• Each promoter of the issuer, if the issuer has been organized within the past five years;
• Each beneficial owner having power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the
issuer;
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: $\Box$ Promoter $\Box$ Beneficial Owner $\Box$ Executive Officer $\Box$ Director $\Box$ General and/or Managing Partner
Full Name (Last name first, if individual)  David 1. Scheer
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Scheer & Company Inc., 250 Main Street, Branford, CT 06405
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☑ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual) Steven A. Nichtberger, MD
Business or Residence Address (Number and Street, City, State, Zip Code) 501 Northwick Lane, Villanova, PA 19085
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual) Anthony Atala, MD
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Wake Forest University Dept. of Urology, Medical Center Blvd., Winston-Salem, NC 27157
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)  Eileen More
Business or Residence Address (Number and Street, City, State, Zip Code) 36 Weston Road, Weston, CT 06883
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)  Brad Vale
Business or Residence Address (Number and Street, City, State, Zip Code) 5858 Felter, San Jose, CA 95132
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual)  Carl-Johan Dalsgaard
Business or Residence Address (Number and Street, City, State, Zip Code) c/o HealthCap Odlander, Fredrikson & Co. AB, Strandvagen 5B, SE-114 51, Stockholm, Sweden
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full Name (Last name first, if individual) Scheer Investment Holdings VI, LLC
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Scheer & Company Inc., 250 Main Street, Branford, CT 06405

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					B. INF	ORMATI	ION ABO	UT OFFI	ERING	<del></del>	<del></del>		<del> </del>
												TV	s No
1	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?												2 140
1. Has the	issuer so	ia, or aoes						ors in this of g under UI		•••••			Œ
1			Allsv	ver also in	Appendix	c, Column	2, 11 IIIII	g under Ot	LUE.			1	
What is the minimum investment that will be accepted from any individual?													
2. What is the minimum investment that will be accepted from any individual?												N/A	
3. Does the offering permit joint ownership of a single unit?											Ye	s No	
3. Does th	ie offering	permit jo	int owners	hip of a si	ngle unit	************			••••••	••••••			
												-	J
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any													
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the													
offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC													
and/or with a state or states list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
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Full Name	(Last nam	o first if	individual	<del></del>								_L	
run Name	(Last nan	ie mst, m	maividuai	)									
Business o	r Residenc	ce Address	s (Number	and Stree	t, City, St	ate, Zip C	ode)						
Name of A	ssociated	Broker or	Dealer:										
•													
States in W	/hich Pers	on Listed	Has Solici	ted or Inte	ends to So	licit Purch	asers		<del></del>				
(Check "A	ll States"	or check in	ndividual :	States)									□ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[ FL]	[GA]	[ HI]	[ ID ]	
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[ RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name	(Last nam	ne first, if	individual	)									
Business o	r Residenc	e Address	(Number	and Stree	t, City, St	ate, Zip Co	ode)						
			`		• •	•	ŕ						
Name of A	ssociated	Broker or	Dealer		<del></del>								
Traine of 1	ssociatea	DIOKEI OI	Dealer										
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States in W	nich Pers	on Listed	Has Solici	ted or inte	enas to So	licit Purch	asers						□ All States
[AL]	I States (	f A 71	[AD]	reales)		[CT]	(DE)	וחכז	[ FL]	[GA]	[ HI]	[ ID ]	All States
	[RN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	j
[MT]	[NE]	[NV]	[NH]	[ NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name													
i un ivante	(mast Hall)	ic mot, ii i	marvidual,	1									}
<del></del>	<del></del>			1.6	- 6:								
Business o	r Kesideno	e Address	(Number	and Stree	t, City, St	ate, Zip Co	ode)						
Name of A	ssociated	Broker or	Dealer					. <u>—</u> ——				- <del></del>	
States in W	hich Pers	on Listed	Has Solici	ted or Inte	nds to So	licit Purch	asers						
(Check "A							•••••						□ All States
[AL]	[AK]	[AZ]	[AR]	[CÁ]	[CO]	[CT]	[DE]	[DC]	[ FL]	[GA]	[HI]	[ ID ]	
[ [L]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	ļ
[MT]	[NE]	[NV]	[NH]	[ NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already

exchanged	rannis below the amor	unts of the securities offered for exchange and already	Aggregate	Amount
Type of Security			Offering Price	Already Sold
Debt			-0-	-0-
Equity			*	*
	☑ Common	☐ Preferred (convertible)		
		ts)	*	*
·			-0-	-0-
			-0-	-0-
			\$3,510,372	\$3,510,372
Enter the number of accoffering and the aggrega	credited and non-accre tte dollar amounts of the who have purchased	Column 3, if filing under ULOE.  Edited investors who have purchased securities in this heir purchases. For offerings under Rule 504, indicate securities and the aggregate dollar amount of their er is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investo	ors		11	\$3,510,372
			-0-	-0-
		only)	N/A	N/A
3. If this filing is for an offer sold by the issuer, to date first sale of securities in the securiti	ering under Rule 504 o te, in offerings of the t	Column 4, if filing under ULOE or 505, enter the information requested for all securities types indicated, in the twelve (12) months prior to the securities by type listed in Part C – Question I.	Type of Security	Dollar Amount Sold
Type of offering			N/A	N/A
			N/A	N/A
•		-	N/A	N/A
		_	N/A	
4. a. Furnish a statement of a in this offering. Exclude amo	all expenses in connect ounts relating solely to iture contingencies. If	tion with the issuance and distribution of the securities organization expenses of the issuer. The information the amount of an expenditure is not known, furnish an	1,111	
Transfer Agent's F	ees			-0-
Printing and Engra	ving Costs			-0-
Legal Fees				\$50,000
Accounting Fees				-0-
Engineering Fees.				<b>-</b> 0-
Sales Commissions	s (specify finders' fees	separately)		-0-
Other Expenses (id	lentify): Blue Sky filing	g fees		-0-
•				

<sup>\*</sup> The purchasers received both convertible promissory notes and shares of common stock in exchange for cash in the amount of the total herein.

total expenses furnished in response to Part C - Ques	stion 4.a. This difference is the "adjusted gross			\$	3,460,372
of the purposes shown. If the amount for any purpose	is not known, furnish an estimate and check the	box to			
			Payments to Officers, Directors & Affiliates		Payments To Others
Salaries and fees					
Purchase of real estate					
Purchase, rental or leasing and installation of	machinery and equipment		<del></del> ,		
Construction or leasing of plant buildings and	d facilities				
· · · · · · · · · · · · · · · · · · ·		_	<del></del>		
,					
Salaries and fees					2.460.350
stal expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted groceeds to the issuer."  Idicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be use purposes shown. If the amount for any purpose is not known, furnish an estimate and cheese of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the in response to Part C - Question 4.b above.  Salaries and fees  Purchase of real estate.  Purchase, rental or leasing and installation of machinery and equipment.  Construction or leasing of plant buildings and facilities.  Acquisition of other businesses (including the value of securities involved in this offerin may be used in exchange for the assets or securities of another Issuer pursuant to a merg Repayment of indebtedness (contingent on sufficient funds being raised in offering)  Working capital.  Other (specify):  Column Totals  Total Payments Listed (column totals added)  D. FEDERAL SIGNATURE  Suer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is aking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of inted investor pursuant to paragraph (b)(2) of Rule 502.  Fe (Print or Type):  Jon, Inc.  Signature  Signature  Title of Signer (Print or Type):  Jon, Inc.  Title of Signer (Print or Type):  Jon ATTENTION				☑ \$ 	3,460,372
Column Totals				<b>⊻</b> \$	3,460,372
Total Payments Listed (column totals a	added)	-	Image: section of the content of the	\$3,460	),372
	D. FEDERAL SIGNATURE				
The issuer has duly caused this notice to be signed by the unde		nder Rule	505, the following s	ignature o	constitutes an
	-				
Issuer (Print or Type): Tengion, Inc.		Date June 29	9, 2004		
Name of Signer (Print or Type):  David Scheer					
	ATTENTION				
Intentional misstatements or omissions of fac	t constitute federal criminal violations. (	See 18	U.S.C. 1001.)		
			<del></del>		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

APPENDIX Type of investor and amount purchased in State (Part C-Item 2) Intend to sell to Type of security and Disqualification under aggregate offering non-accredited State ULOE (if yes, price offered in State investors in attach explanation of (Part C - Item 1) State waiver granted) (Part (Part B-Item 1) E-Item 1) Yes No State Yes No Number of Amount Number of Amount Accredited Non-Accredited Investors Investors AL AK  $\overline{AZ}$ AR CA CO CT \$310,372 Convertible 2 \$310,372 Promissory Notes and Shares of Common Stock DE DC FL GA HI ĪD ĪĹ ΙN IA KS KY LA ME MD MA ΜI MN MS MO

APPE	NDIX							<del></del>	
1	non-a	2 d to sell to accredited tors in State B-Item 1)	3 Type of security and aggregate offering price offered in State (Part C - Item 1)	Type of inve	stor and amoun	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E- Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Yes	No		
MT	+				<del> </del>	<del> </del>	1	<del> </del>	
NE	†		<del> </del>	<del> </del>	<del> </del>	<del> </del>		<del> </del>	
NV	<del>                                     </del>			<del> </del>	<del> </del>		<del> </del>	<del>                                     </del>	<del> </del>
NH	<del> </del>			<del></del>	<del> </del>		<del> </del>		<del> </del>
NJ			\$1,500,000 Convertible Promissory Notes and Shares of Common Stock	1	\$ 1,500,000				
NM	<del> </del>		<del> </del>			<del>                                     </del>			
NY					<del> </del>	<del> </del>			
NC	†				<del> </del>	<del> </del>	<u> </u>		
ND	1						ļ		
ОН	1					<del> </del>	ļ	1	
OK	1				<del> </del>	<del>                                     </del>		<del> </del>	
OR									
PA			\$100,000 Convertible Promissory Notes and Shares of Common Stock	1	\$100,000				
RI	1			<del> </del>	<del> </del>				
SC	1								
SD	<b>†</b>						<b>†</b>		
TN	1				<del> </del>				
TX	1				<del> </del>			1	
UT	1				<del> </del>				
VT					1		<u> </u>		
VA	1								
WA		-							
WV									
WI	<b>†</b>								
WY	<del>                                     </del>	<b></b>				1			
PR	1					<del> </del>	<del> </del>		